State of Connecticut COMMISSION ON FIRE PREVENTION AND CONTROL

FIREFIGHTER I, FIREFIGHTER II, AND HM/WMD

Application for Certification

Please **PRINT** all information legibly as it will appear on your permanent records. Both the trainer & trainee must complete this entire application prior to submission.

APPLICANT DATA

APPLICANT DATA							
Last Name			ame	MI			
Home Street Address							
Town				State		Zip Code	
Telephone							
Home ()	Work ()		Cell	()		
Fire Department Name:							
Fire Department City/Town:							
Fire Fighter (Check One):			Email Address:				
Career Volunteer							
ID Number	Your ID number consists of the <u>first (3) letters of your last name</u> and <u>the last four (4) numbers of your social security number.</u>						
ID Number	Example: John Adams - SS # 000-00-5555						
	The new ID # will be ADA-5555						
By my signature, I acknowledge that, I have 12 months from the date of the on this application to complete all Cercomponents required for this Certifica EXAMINATION DATA Type of Examination (Applicants may Division must receive applications a applications will not be accepted.	Lead Instructor's tification Examinition.	signatur ation types of	Applicant Signa	ture a single		Certification	
Written Examination Date			Practical Examination Date				
Examination Location			Examination Location				
\$95.00 application fee. Please check	type of payment	below:					
Card Holde	r's Name:				_	e	
	DO N	OT SE	END CASH				
By my signature below, I certify that the least 18 years of age on the date of the	ie <i>Practical Skills</i>	or Writt					
statement on this application is a Clas	s A misdemeano	r.			T _		
Applicant's Signature					Date		

Remit completed application and fee to:

Commission on Fire Prevention and Control 34 Perimeter Road, Windsor Locks, CT 06096-1069

Name: FFID#:

Firefighter I, II, HM/WMD - NFPA Standard 1001 & 1072 Compliance

The Application process for Firefighter I, II and HM/WMD Certification testing consists of three Sections:

Section A - Local Fire Department Skills Evaluation

Section B - Fire Fighter I and Fire Fighter II Live Fire Suppression

Section C - Non-Live Fire: Firefighter I, Firefighter II and HM/WMD Practical Skills Compliance and Evaluation

Section A - Position Task Book

Evaluation and confirmation of the individual's performance of all tasks may involve more than one evaluator and can occur on the fire training ground or in a classroom simulation. All task must be evaluated. All statements within a task which require an action (contain an action verb) must be demonstrated before the task can be signed off.					
Position Task Book	I verify that the Firefighter I/Hazardous Materials Weapons of Mass Destruction Position Task Book is complete.				
Instructor Signature	Date				

Section B - Live Fire Suppression

Prior to certification at the Fire Fighter I and II levels, each candidate must complete specific live fire suppression activities in accordance with the following NFPA 1001 objectives: 4.3.7, 4.3.8, 4.3.10, 4.3.16, 4.3.19, 5.3.1, 5.3.2, and 5.3.3. These activities must be verified on a separate, "Firefighter I and Firefighter II Certification Live Fire Suppression Verification Form".

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Section C - Non-Live Fire Practical Skills Compliance and Evaluation							
Training Program Completion							
All objectives of NFPA Standard 1001, Chapters 4 and 5, 2019 Edition and NFPA Standard 1072, Chapters 4, 5, and 6, 2017 Edition must be addressed by an approved training methodology prior to acceptance into the certification testing process. Check methodology used below:							
	Compliance Method 1- Successful completion of the Connecticut Fire Academy Recruit Firefighter training program						
	Compliance Method 2 - Successful completion of a Connecticut Regional Fire Training School Firefighter I/II training program						
	Compliance Method 3 - Proof of National Board on Fire Service Professional Qualifications, Inc. or International Fire Service Accreditation Congress Firefighter I/II accredited certification						
	Compliance Method 4 - Individual training or educational programs (Prior CFPC approval required)						
Training Program Location Date Program Completed							
Prac	tical Skills Evaluation Sheets						
Each candidate for Firefighter I, Firefighter II and HM/WMD Certification must be provided with, exposed to, and evaluated on all Firefighter I, Firefighter II and HM/WMD Practical Skills Evaluation Sheets in preparation for Certification Testing. The Candidate's initials in this section acknowledge receipt of a copy of all Firefighter I, Firefighter II and HM/WMD Skills Evaluation Sheets.							
	reby acknowledge receipt of the Firefighter I, Firefighter II and HM/WMD Practical s Evaluation Sheets.	ials:					
By signing below, I certify that this candidate completed a training program designed to meet or exceed the requirements of NFPA 1001, Chapter 4 and 5, 2019 edition, and NFPA 1072, Chapter 4, 5, and 6, 2017 edition. This candidate has achieved satisfactory scores on all examinations, demonstrated proficiency in all skill evaluations identified for that level by having been observed and evaluated by a certified and qualified Fire Service Instructor in the accomplishment of these skills, per <i>Regulations of Connecticut State Agencies</i> , Section 7-3231. I have reviewed all training records indicating dates and times of training and verified that this candidate is prepared for the certification process.							
Lead	Instructor Printed Name		Telephone Number				
Leac			. c.epilone itamber				
Lead	d Instructor Signature	Date					